PART B - FEE(S) TRANSMITTAL

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INSTRUCTIONS: This appropriate. All further indicated unless correcte maintenance fee notificat	form should be used for correspondence including the below and irrected other tions.	or transmitting the ISSU g the Letent, advance or erver in Block 1, by (a	JE FEE and PUBLICAT rders and notification of a) specifying a new corre	TION FEE (if requirements fees was pondence address;	ired). Blocks vill be maile and/or (b) i	s I through 5 sh d to the current of indicating a separ	ould be completed whe correspondence address ate "FEE ADDRESS" f	as for
CURRENT CORRESPONDI	ENCE ADDRESS (Note: Use Bid	ock 1 for any change of address)	Fer Par	e(s) Transmittal. Th	is certificate	cannot be used for as an assignmen	domestic mailings of the rany other accompanying to range formal drawing, mu	ng
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AUSTIN, TX 78	3759					(Depositor's name	E)	
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						(Date	<u></u>	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTO	R	ATTORNEY	DOCKET NO.	CONFIRMATION NO.]
09/535,581	03/27/2000		Rabindranath Dutta	<u>-</u> .		90891US1	3807	
TITLE OF INVENTION SYSTEM AND PROGRA		IGHT VIOLATION VI	A STREAMED EXTRAC	TION AND SIGN.	ATURE AN	alysis in a m	ETHOD,	
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APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUB	PREV. PAID ISSU	E FEE TO	TAL FEE(S) DUE	DATE DUE	٦
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· EXAMINER ART UNI		ART UNIT	CLASS-SUBCLASS	7 - 12/31	1/2007 AWC)NDAF2 000000	41 090447 09535	581
ELISCA, PIERRE E		3621	705-057000	01 F	C:1501	1440.00 D	A	
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Lange of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Thee Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up t or agents OR, alternat (2) the name of a sing registered attorney or	a single firm (having as a member a ley or agent) and the names of up to an attorneys or agents. If no name is				
			THE PATENT (print or t	• •				_
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.								
(A) NAME OF ASSIC	l Business	(B) RESIDENCE: (CITY and STATE OR COUNTRY) Armonk, New York						
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4a. The following fee(s)	are submitted:	4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 09-0447 (enclose an extra copy of this form).						
5. Change in Entity Star	tus (from status indicated s SMALL ENTITY statu	•	☐ b. Applicant is no lo				TR 1.27(g)(2).	_
			ed from anyone other than					in
Authorized Signature				Date _ 11/0		-		
Typed or printed name Andrew J. Dillon			Registration No. 29,634					
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